



**Report to Congress on  
Implementation of Assistance to Combat HIV/AIDS  
22 USC 2151b-2(f): Assistance to Combat HIV/AIDS**

**Introduction**

When President George W. Bush announced the creation of the President's Emergency Plan for AIDS Relief (PEPFAR) in his 2003 State of the Union address, and the U.S. Congress quickly followed by passing the *United States Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act of 2003* in strong bipartisan fashion, it fundamentally changed the course of public health history.

Since then, the U.S. government, with the strong unwavering support of the U.S. Congress, has proudly invested nearly \$100 billion in the global AIDS response through PEPFAR and the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund). On World AIDS Day 2022, President Biden announced that the U.S. government, through PEPFAR, saved more than 25 million lives, ensured that 5.5 million babies were born HIV-free, and enabled more than a dozen countries to control the spread of HIV or reach the Joint United Nations Programme on HIV/AIDS (UNAIDS) 95-95-95 HIV treatment targets, even without a vaccine or a cure.

Reaching these goals in these countries was virtually unimaginable when PEPFAR began, and a series of other countries are also on pace to attain them soon. These are also critical milestones toward achieving the UNAIDS Sustainable Development Goal 3 target of ending the AIDS epidemic as a public health threat by 2030.

“Our important work to end HIV extends far beyond our borders too, with continued support for the game-changing, bipartisan President’s Emergency Plan for AIDS Relief (PEPFAR). Since 2003, PEPFAR has helped at least 12 high disease-burdened countries bring HIV under control and has saved over 25 million lives.”

-President Joseph R. Biden, World AIDS Day 2022

Over the years, PEPFAR has built on the robust network of HIV service delivery, public health, and clinical and community care platforms to tackle the unique issues confronting people living with HIV and help them have healthy lifespans – beginning with late-stage care and, more recently, addressing tuberculosis (TB) prevention, cervical cancer, and other comorbidities. PEPFAR has further expanded our investments in community-led monitoring to pinpoint key barriers to HIV service access and continuity at the facility level and deploy innovative solutions to address those barriers.

PEPFAR investments targeted towards HIV response helped build sustainable health and community systems in over 50 countries, including more than 70,000 health clinics; 3,000 laboratories; over 300,000 jobs for health care workers; expansive supply chains for health care commodities; and strong systems for data collection and use. To help address HIV/AIDS, PEPFAR’s investment of over \$1 billion annually in health systems strengthening initiatives dramatically expanded broader access to healthcare and strengthened pandemic preparedness, response capabilities, and overall health security.

Through PEPFAR, the United States has moved the HIV pandemic from tragedy toward triumph. Building on the firm foundation of PEPFAR investments since 2003, the United States set a bold course for bringing HIV under control in high-burdened countries through laser-focused programs guided by granular data, quarterly analysis and use of these data for rapid course correction, and partner alignment for maximum impact. PEPFAR will continue to show the power of people-centered health care service delivery through focusing on five strategic pillars: health equity for priority

populations, sustaining the response, public health systems and security, transformative partnerships, and following the science.

To sustainably control the HIV epidemic, we must end the inequities that still stand in our way and result in gaps in services, which have only been exacerbated by the COVID-19 pandemic. We cannot end AIDS if we deny people's human rights, sexual and reproductive rights, or foster discrimination against people who are the most vulnerable to HIV. We must collaborate with our partner governments and communities to eliminate the laws, policies, and practices that make it harder for the populations most impacted by the HIV epidemic – including the LGBTQI+ community, drug users, individuals in commercial sex, racial and ethnic minorities, and women and girls – to have equitable access to quality HIV prevention and treatment services.

The threats to controlling the global HIV pandemic are real. Many countries with the highest disease burden have achieved or are on a track to soon bring HIV under control; however, these gains can quickly be lost. Together, we must support countries that have brought HIV under control to utilize comprehensive granular data to proactively respond to demographic and geographic shifts, changes in health outcomes, and threats of other infectious diseases. We must continue to support enabling environments and erase barriers to quality HIV service access, such as stigma and discrimination, harmful policies, and discriminatory legislation that further marginalize individuals and threaten the human rights and dignity of all.

We are at a crossroads in the global AIDS response, and the choices we make now will have critical implications for years to come. After decades of progress, our work is not yet finished. The 2022 In Danger: UNAIDS Global AIDS Update warns that progress toward controlling the spread of HIV is faltering, resources and investments are shrinking, and the inequality gap between and within countries and populations is widening – putting the world on a dangerous trajectory in the fight to end the HIV/AIDS epidemic by 2030 and threatening the great progress we have made. If we falter, millions more people will be infected with HIV and millions more people

now living with HIV will die of AIDS. But if together we confront the challenges before us with conviction and compassion, we can pave the path to end the HIV epidemic everywhere and to secure a better future for everyone.

## **Key Points**

### **Saving Lives and Bringing HIV Under Control**

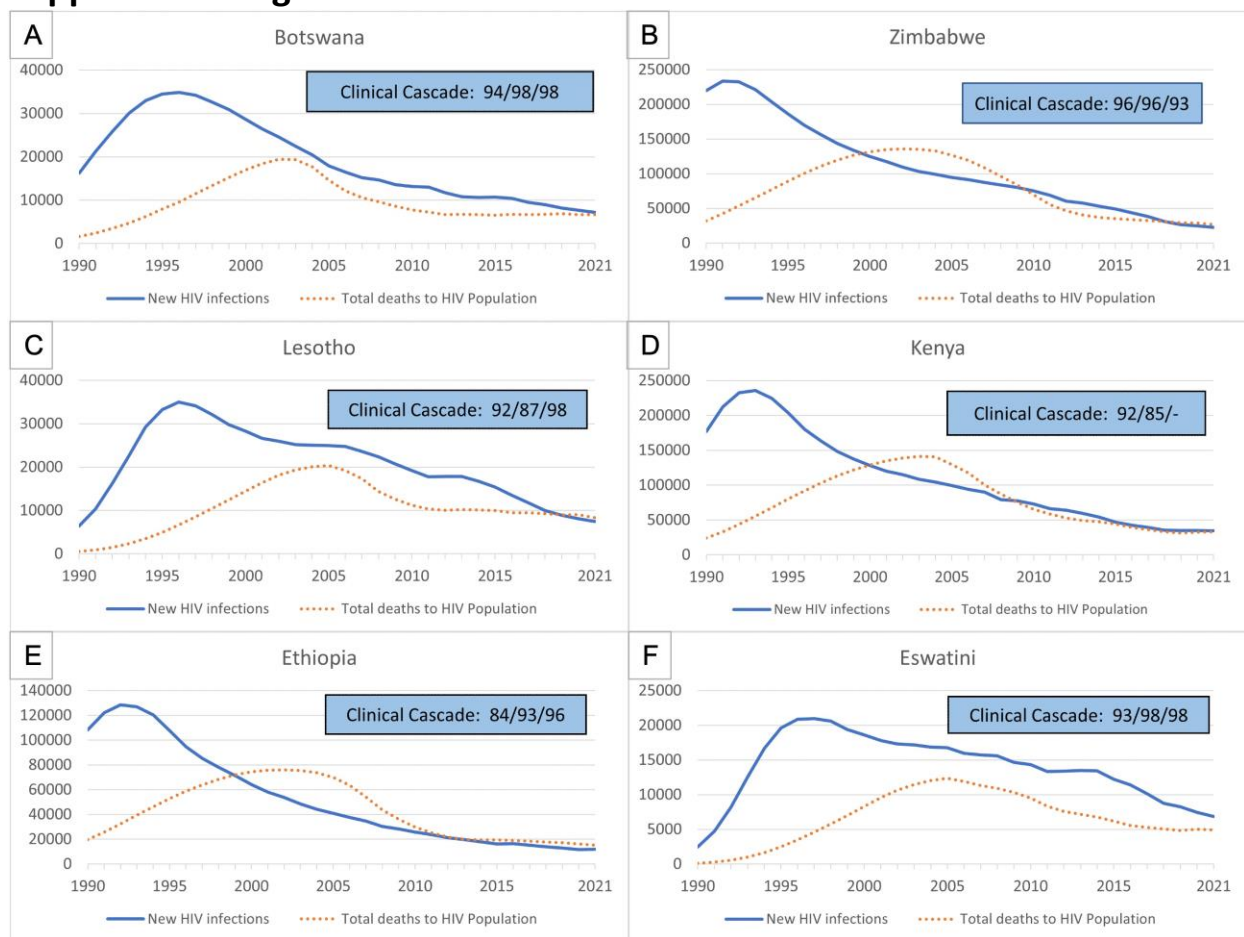
As of December 2022, a dozen high-disease burden countries have HIV under control with PEPFAR support [Table 1] or surpassed the 2025 UNAIDS 95-95-95 targets based on results from recent PEPFAR-supported Population-Based HIV Impact Assessment (PHIA) surveys [Figure B]. PEPFAR continues to deliver person-centered HIV prevention and treatment to millions of women, men, and children, enrolling them in a continuum of care specific to their individual needs and contexts. Thanks to PEPFAR and our many partners, AIDS-related deaths globally have fallen from a peak of 2 million in 2004 to 650,000 in 2021. HIV treatment has increased life expectancy dramatically, allowing for communities and economies to grow and flourish.

In 2004, over 1.8 million new HIV infections were documented yearly across PEPFAR-supported countries; in 2021, in large part because of PEPFAR, new HIV infections per year have decreased by half. According to UNAIDS, most new infections now come from South Africa, Nigeria, Mozambique, Tanzania, and Russia. These countries must bring HIV under control to sustain progress towards ending the HIV pandemic in the region and across the world.

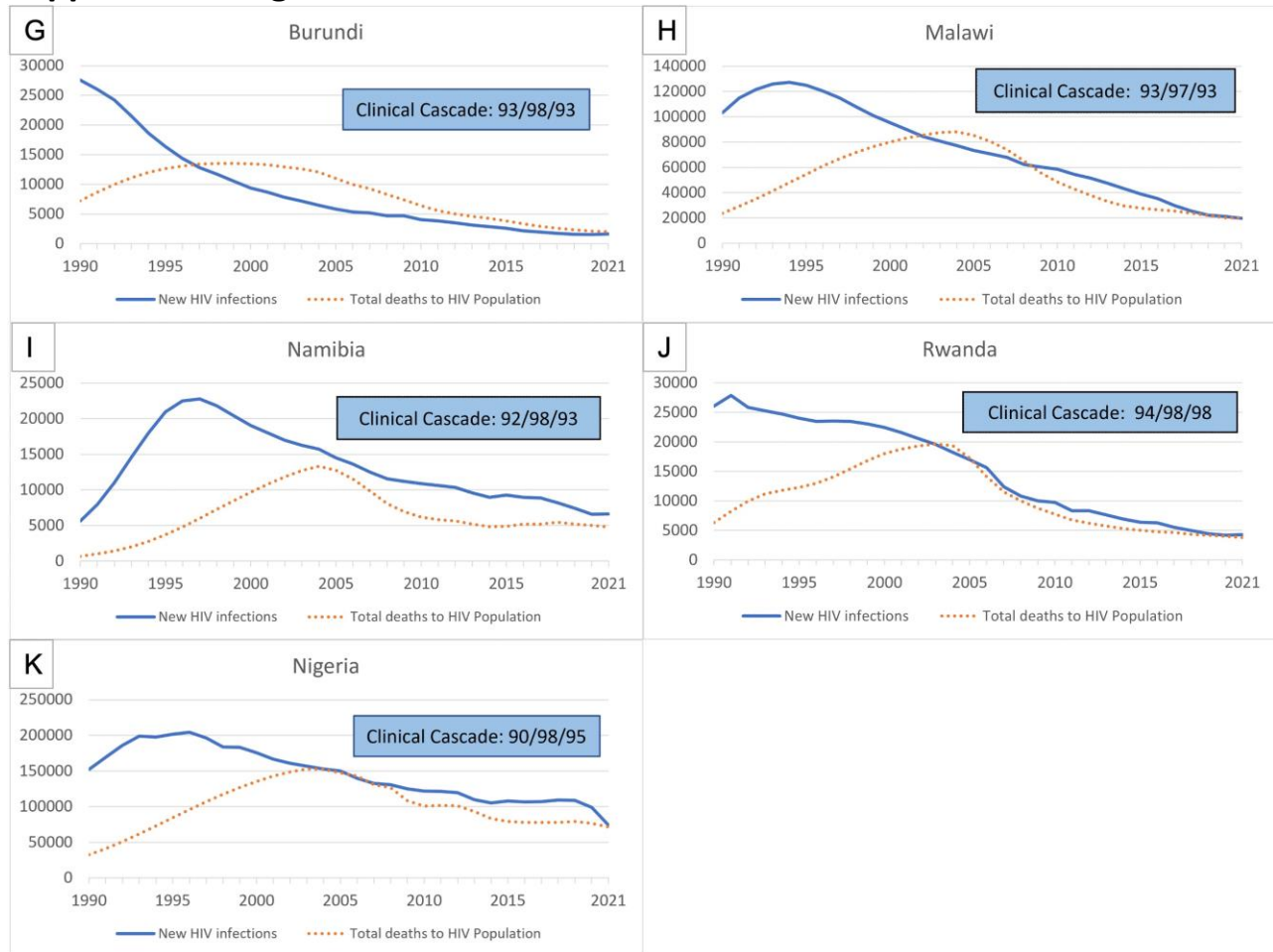
**Table 1: PEPFAR-supported high-disease burden countries that have brought HIV under control**

<b>Botswana</b>	<b>Eswatini</b>	<b>Namibia</b>
<b>Burundi</b>	<b>Ethiopia</b>	<b>Kenya</b>
<b>Lesotho</b>	<b>Malawi</b>	<b>Nigeria</b>
<b>Rwanda</b>	<b>Zambia</b>	<b>Zimbabwe</b>

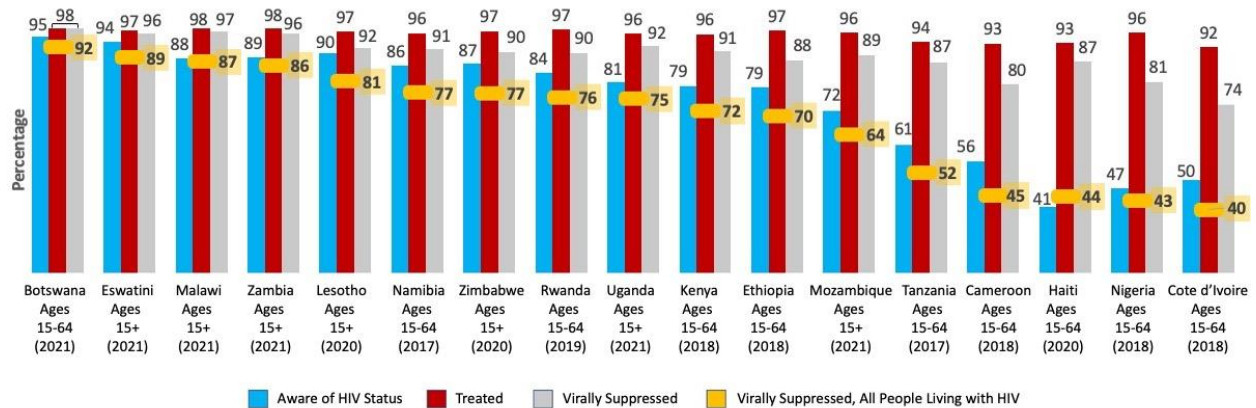
**Figure A. (Panels A-F) PEPFAR-Supported Countries That Have a Stabilized HIV Epidemic and Have Reached the 73 Percent Population Viral Load Suppression Target**



**Figure A: (Panels G-K) PEPFAR-Supported Countries That Have a Stabilized HIV Epidemic and Have Reached the 73 percent Population Viral Load Suppression Target**

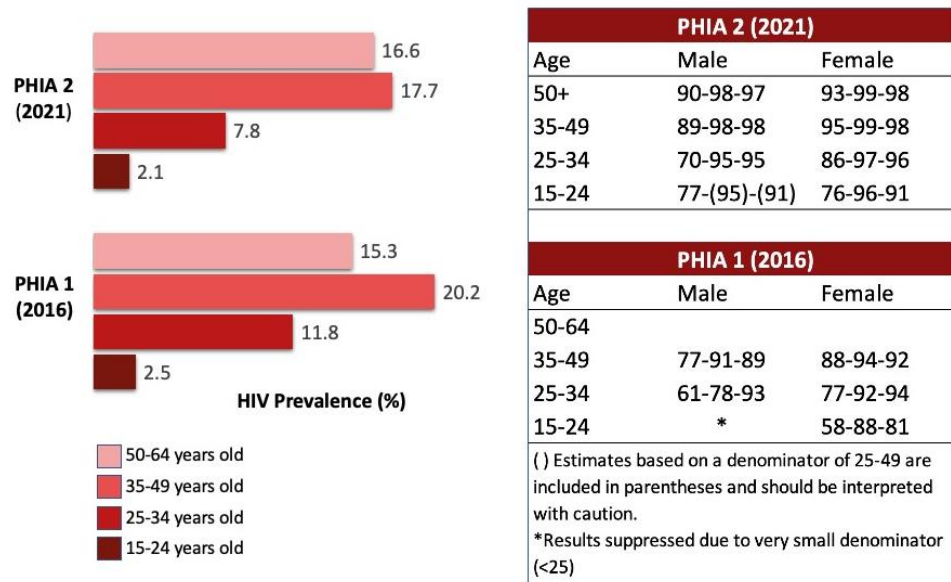


**Figure B. Progress Toward Equitable Services Reaching UNAIDS 95-95-95 Targets Among Adults (15 Years-of-Age and Older) Across Select Countries in Southern, East, and West Africa**

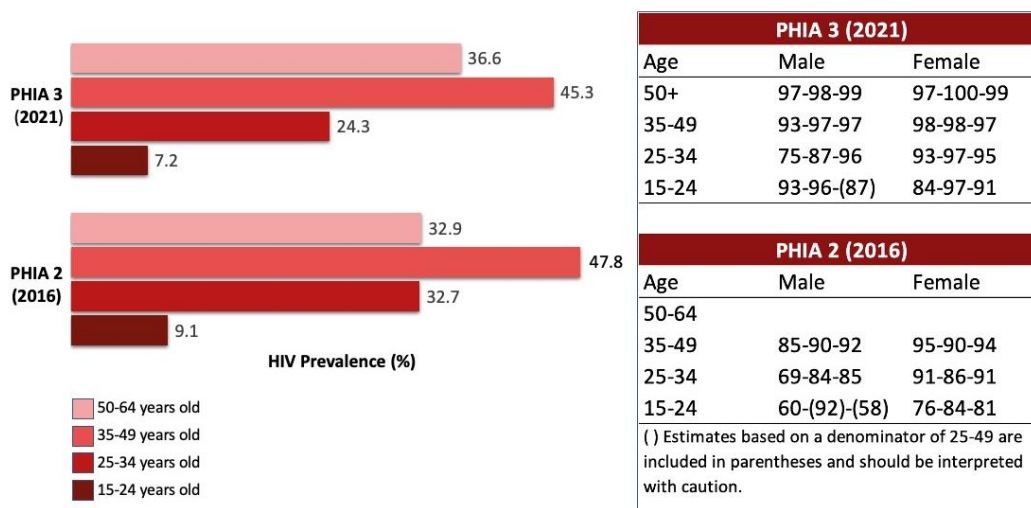


Since 2020, nine second-generation PEPFAR-supported Population-Based HIV Impact Assessments (PHIAs) were completed despite the COVID-19 pandemic: Lesotho, Zimbabwe, Botswana, Malawi [Figure C], Eswatini [Figure D], Zambia [Figure E], Uganda, Mozambique, and Haiti. Their findings clearly demonstrate that achieving 73 percent population viral load suppression (95-95-95) nationally and across age and sex bands is possible, leading to stabilized and even decreasing HIV disease burden. Botswana's PHIA results, released in 2022, show they are the first country to reach all three 95 targets at 95-98-98, with 92 percent population viral load suppression. Eswatini also released results in 2022 and is well on its way to bringing HIV under control with 94-97-96. All countries show there is still work to be done in the goal to end HIV/AIDS as a public health threat by 2030, especially among males, youth, and children.

**Figure C: HIV Impact and Progress Toward Health Equity Reaching 95-95-95 Targets in Malawi from First PHIA Survey (2016) to Second PHIA (2021)**

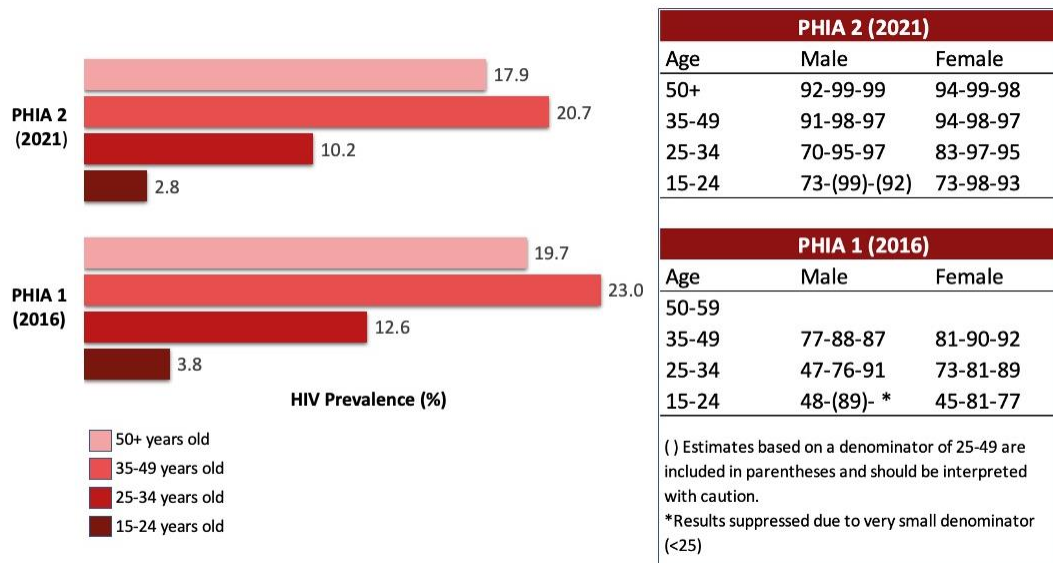


**Figure D: HIV Impact and Progress Toward Health Equity Reaching 95-95-95 Targets in Eswatini from Second PHIA Survey (2016) to Third PHIA (2021)**

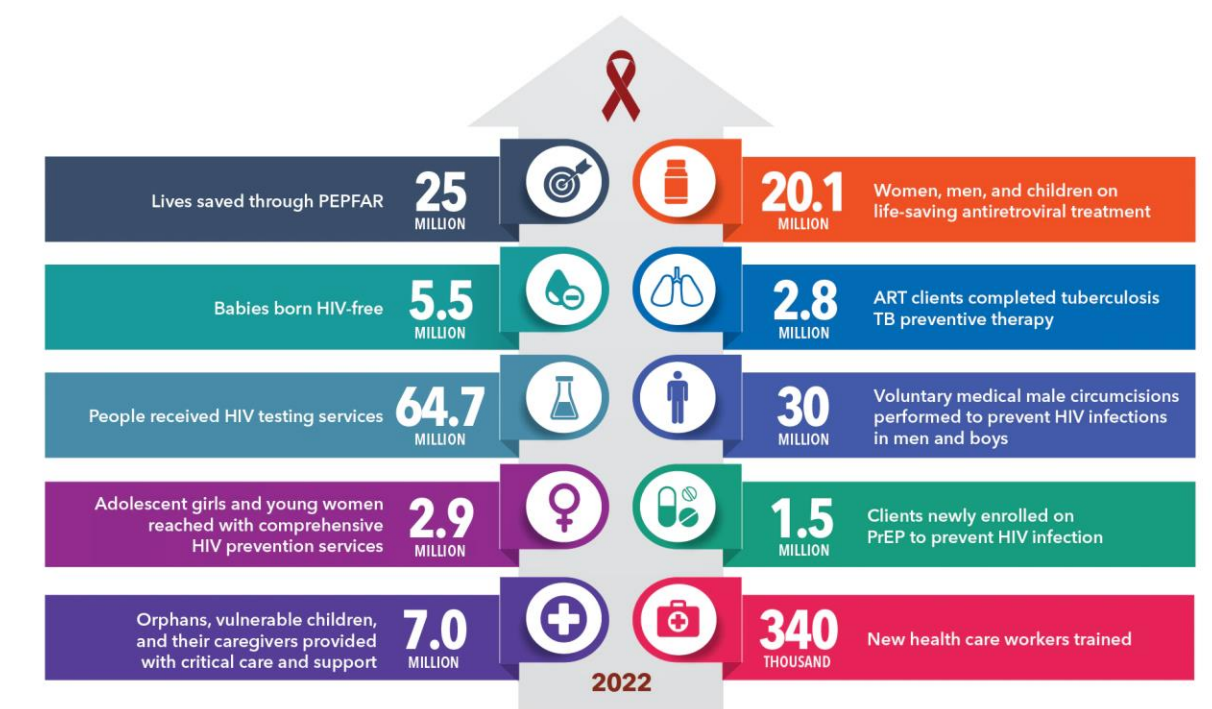




**Figure E: HIV Impact and Progress Toward Health Equity Reaching 95-95-95 Targets in Zambia from First PHIA Survey (2016) to Second PHIA (2021)**

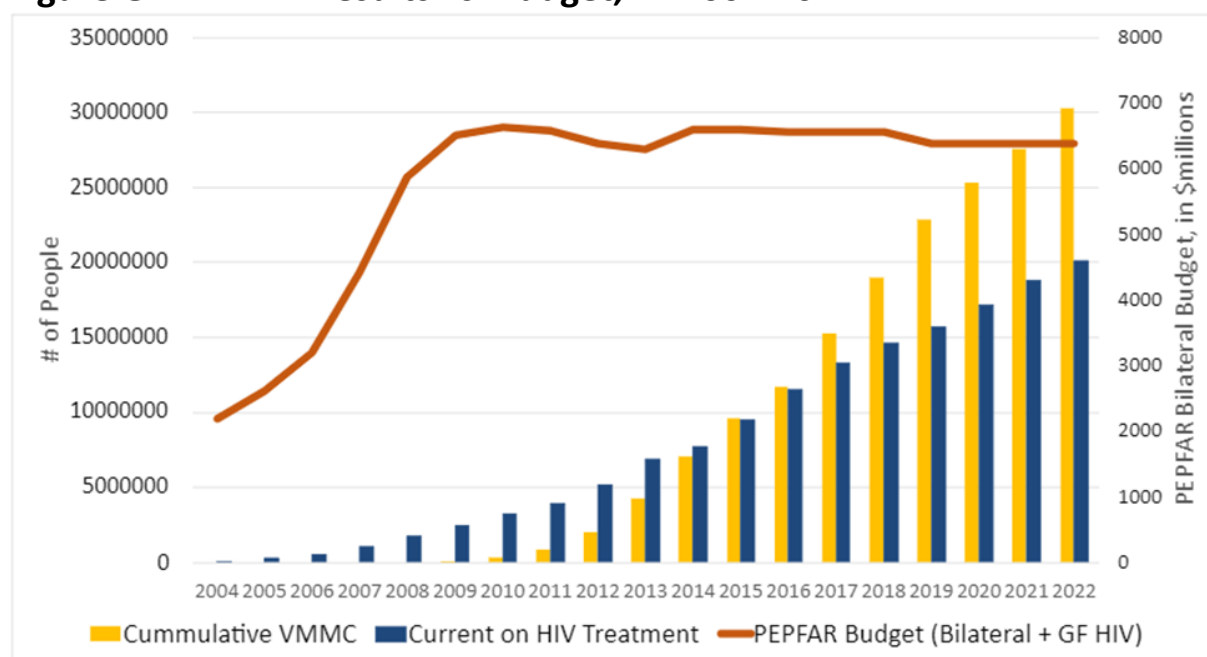


**Figure F: Accelerating HIV Gains Despite Unprecedented Adversity of COVID-19**



PEPFAR continues to build on the robust HIV service delivery platform that we have helped strengthen in partner countries to tackle the unique issues confronting people living with HIV, including cervical cancer, TB prevention, and other related diseases, so they can enjoy a normal lifespan. PEPFAR has continually innovated and used data-driven decision making to deliver even more life-saving impact with every dollar we invest [Figure G].

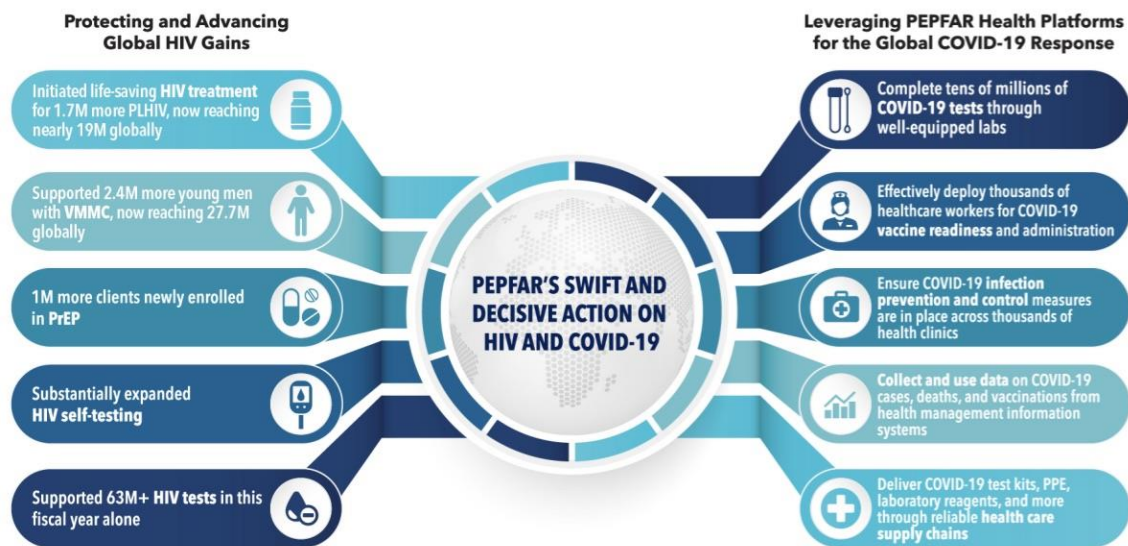
**Figure G: PEPFAR Results vs. Budget, FY 2004-2022**



### Accelerating HIV Efforts and Supporting the COVID-19 Response

The COVID-19 pandemic has touched every corner of our world. Millions of people have lost loved ones and had their lives upended in myriad ways. Amidst this tragedy, we have witnessed countless acts of compassion, generosity, and courage, reminding us of our common humanity.

As the global community continues to confront the dual pandemics of HIV and COVID-19, PEPFAR has worked tirelessly to save and improve lives through swift and decisive action driven by data, agility, and innovation [Figure H].

**Figure H: PEPFAR's Swift and Decisive Action on HIV and COVID-19**

When COVID-19 hit, PEPFAR responded immediately to adapt service delivery, accelerate program innovation, and drive policy change to better serve our clients. This included preparing for antiretroviral treatment continuity prior to COVID-19 lockdowns as well as dramatically expanding virtual engagement of our clients, decentralized drug distribution, and rapid roll-out of multi-month dispensing for lifesaving antiretrovirals to keep clients in care and reduce their exposure to COVID-19. Eligibility requirements for multi-month dispensing were expanded in many countries, leading to an increase in its availability at PEPFAR-supported sites from 46 percent in December 2019 to 72 percent in September 2022. In the past three years, the absolute number of clients benefitting from multi-month dispensing rose dramatically from 4.8 million to 14.5 million.

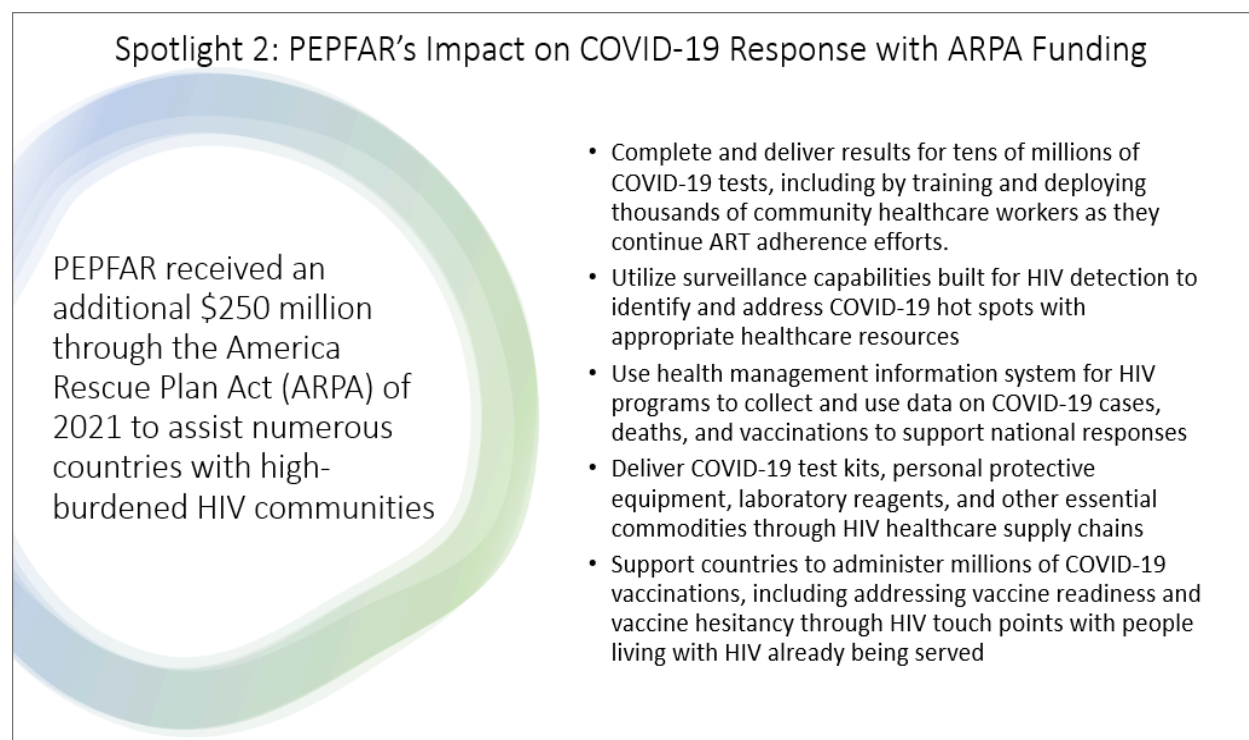
Through these and other efforts, PEPFAR has not only ensured continuity of antiretrovirals for people living with HIV, but also delivered HIV treatment to 1.3 million more people living with HIV in FY 2022 alone. PEPFAR-funded treatment now reaches over 20 million people globally.

PEPFAR also took early action on COVID-19 infection prevention and control measures to protect our clients and the healthcare workers who serve them.

While these necessary steps initially slowed progress in some HIV prevention programs, progress has since expanded strongly. In FY 2022, PEPFAR supported 2.2 million more young men with voluntary medical male circumcision for HIV prevention (now having reached 30.3 million globally); enabled 1.5 million more clients to newly enroll in pre-exposure prophylaxis (PrEP); and substantially expanded HIV self-testing. In FY 2022, PEPFAR also supported more than 65 million HIV tests.

One of PEPFAR's most impactful living legacies is the robust and enduring public health and clinical platforms that we have helped build in partner countries. As they have proven previously with Ebola, avian flu, and other disease threats, PEPFAR-supported capacities have been vital to our partner countries in their response to COVID-19 [Figure I].

### Figure I: PEPFAR's Impact on COVID-19 Response with ARPA Funding



PEPFAR continues to protect and advance HIV gains, including by helping countries and communities fight COVID-19, as appropriate, to help mitigate

the impact on HIV efforts and efficiently leverage these partner countries robust health systems built through nearly two decades of PEPFAR investment.

The COVID-19 pandemic has accelerated innovations in HIV service delivery, making it more person-centered, agile, and resource-efficient. PEPFAR-supported public health and clinical platforms in countries have proven responsive and resilient – advancing HIV progress despite challenging conditions, and being leveraged to deliver broader, more equitable health care access.

### **Building Enduring Capabilities Through Resilient and Capacitated Health Systems**

Through PEPFAR, the U.S. government has strengthened the ability of partner countries to deliver effective, efficient, and sustainable health care – systems which are resilient even in the face of adversity – whether conflict, natural disasters, or other health threats, including most recently with COVID-19. We have helped make the world a more secure place by better equipping partner countries and communities to address other outbreaks swiftly and effectively, such as Ebola, avian flu, cholera, and COVID-19, while protecting and advancing the gains made against HIV.

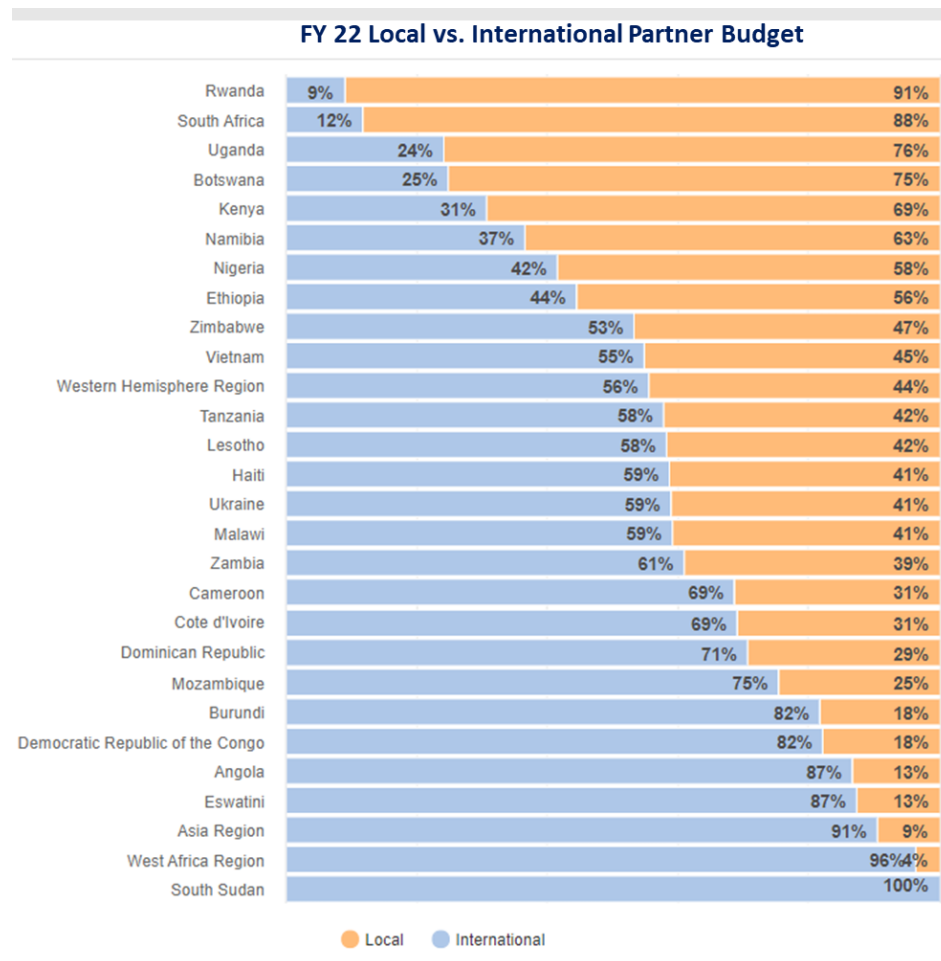
Over the past 20 years, PEPFAR has invested more than \$15 billion to support partner country health systems infrastructure, workforce, and capacity, including expanding their expertise and capabilities in surveillance, laboratories, and public health response – all critical to the HIV response. PEPFAR supports health systems strengthening investments with over \$1 billion annually across 55 countries.

These investments have expanded and strengthened partner countries' high-quality diagnostic and surveillance capacity, enduring infrastructure, pandemic response, and global health security. Every health professional that PEPFAR helps train, every laboratory we strengthen, and every local

organization that we capacitate to help address HIV/AIDS is capable not only of confronting HIV, but also myriad other health challenges.

To bring HIV under control, the full range of HIV prevention and treatment services must be owned and operated by local institutions, governments, and community-based and community-led organizations. That is why PEPFAR has prioritized, and made significant progress toward, transitioning a substantial majority of its funding by agency to local partners [Figure J]. The intent of transitioning to local partners is to increase the delivery of direct HIV services and establish sufficient capacity, capability, and durability of these local partners to ensure successful, long-term local partner engagement and impact.

**Figure J. Funding Local Partners for Sustainable Epidemic Control**



In recent years, PEPFAR instituted community-led monitoring (CLM) of our programs, conducted by local independent civil society organizations. CLM allows PEPFAR to monitor the quality and accessibility of HIV prevention and treatment services and the patient-provider experience routinely and systematically at the facility level. CLM also helps us pinpoint key barriers to HIV service access, uptake, and continuity – and then deploy innovative solutions to address them, all with communities in the lead.

### **Improving Partner Country Policy Environments**

Robust financial HIV resources are critical to success, but they only translate into lives saved if the right policies are optimized and operationalized at the site of delivery for the client. PEPFAR works hard to improve the client experience for people living with and most at risk for HIV through strengthening partner country data capacity and use as well as addressing key policy barriers to bring HIV under control.

PEPFAR has revolutionized the way data are used for maximum impact through capacitating partner countries and multilateral organizations to use a granular, data-driven approach, including age/sex disaggregated data, site-level data, partner performance data, and triangulation of program and surveillance data. With regular and rigorous data use, we have improved partner and facility performance and quality of services, ultimately benefitting those we are privileged to serve.

In recent years, many PEPFAR-supported countries have taken significant strides toward rapidly adopting relevant World Health Organization policies and fully implementing them at scale to address key impediments to health care access. With PEPFAR's support and close collaboration with UNAIDS and partner governments, several partner countries have recently eliminated formal and/or informal user fees to access health services, creating greater opportunities for client access, particularly for the most vulnerable and poor.



With our assistance, most PEPFAR-supported countries have adopted differentiated HIV service delivery models, which tailor the way in which services are provided to better meet the need of clients and reduce unnecessary burdens on the health care system. This includes employing innovations such as decentralized distribution and multi-month dispensing of antiretroviral medications for stable patients; transitioning clients to superior dolutegravir-based antiretroviral regimens that are more effective and better tolerated, leading to improved patient outcomes; and more intensive HIV case-finding and continuity of care for clients who are less likely to start or stay in it.

PEPFAR has also supported countries to tackle issues such as stigma and discrimination, including that facing key populations, and the alarming rates of violence experienced by those aged 9-14, particularly girls, which create additional barriers to HIV service access, uptake, and continuity and violate human rights.

### **Building Lasting Partnerships for Impact and Sustainability**

The successful implementation of PEPFAR programs relies on many actors. Multilateral organizations play a significant role in the scalability and sustainability of HIV programs. Partnerships with private and academic institutions are equally as important in ensuring PEPFAR's success. Collaboration with partners who share the same vision as PEPFAR – ending the HIV/AIDS pandemic – allow us to amplify broader health and development outcomes for the populations PEPFAR serves.

An important measure of PEPFAR's success has been and continues to be building partnerships with a diverse set of private sector stakeholders, including private for-profit institutions, social enterprises, foundations, and private sector health delivery systems. Transformational partnerships are one of PEPFAR's five strategic pillars. By working with multilateral organizations and private sector entities, PEPFAR can create connections with complementary programs. These partnerships align strategies, programs, and operations amongst all entities by working together to pool



procurement to reduce costs and shape the market for new innovations while improving the coordination of health systems and security investments.

PEPFAR works closely with partner countries to bring HIV under control while promoting the long-term sustainability and resilience of their HIV responses. We leverage strategic public-private partnerships to expand our impact and fill key gaps, harnessing the unique strengths and assets of the private sector to drive innovation and deliver results.

PEPFAR continues to coordinate with multilateral partners, including UNAIDS and the Global Fund to Fight AIDS, Tuberculosis and Malaria to optimize our investments, strengthen partner country leadership, and enhance HIV service delivery. We partner with and further capacitate civil society and communities, including faith-based communities and organizations and academia, recognizing that successful and sustainable HIV interventions must involve, be informed by, and specifically tailored to the individuals whom we serve [Spotlight 3]. This includes ensuring people living with and directly affected by HIV are meaningfully engaged in decisions that impact their lives.

**Spotlight 3: Partnering with Communities**

PEPFAR actively partners with civil society and communities at every stage of planning, programming, monitoring and implementation. This partnership is critical to the success and sustainability of PEPFAR and the global effort to combat HIV. Civil society reflecting the needs of PLHIV as well as key populations, including LGBTQ groups, AGYW, and others, provide services that are crucial to realize impact on the epidemic; advocate on behalf of beneficiary populations; hold governments accountable; promote human rights, especially for vulnerable groups; identify challenges and gaps in health care delivery; support data collection; and promote transparency.

PEPFAR supports civil society and communities in myriad ways. This includes funding community-led monitoring (CLM) through local independent civil society organizations to monitor the quality and accessibility of treatment services and the patient-provider experience routinely and systematically at the facility level. The focus of CLM is on getting input from recipients of HIV services, especially key populations and underserved groups, in a routine and systematic manner that will translate into action and change. CLM is central to PEPFAR's people-centered approach to HIV service delivery because it helps put communities, their needs, and their voices at the center of the HIV response. Continued expansion of direct funding to peer led community-based organizations will be critical to sustaining the expanding the gains especially in DREAMS and key population programming.

In the past year, PEPFAR continued to advance several specific partnerships to address key gaps to bring HIV under control.

### *DREAMS Partnership*

Launched by PEPFAR, the Bill & Melinda Gates Foundation, Girl Effect, Gilead Sciences, Johnson & Johnson, and ViiV Healthcare in 2014, the DREAMS public-private partnership provides a comprehensive, multi-sectoral package of core interventions to address key factors that make girls and young women particularly vulnerable to HIV. These include structural factors, such as gender-based violence, exclusion from economic opportunities, and a lack of access to secondary school. DREAMS layers multiple interventions at once so that adolescent girls and young women are surrounded with critical support to keep them safe from HIV and other risks.

### *Go Further Partnership*

To further support women and girls, PEPFAR helped launch the Go Further Partnership to End AIDS and Cervical Cancer in Africa in 2018. Go Further is an innovative public-private partnership with the George W. Bush Institute, UNAIDS, and Merck that aims to end AIDS and cervical cancer in sub-Saharan Africa within a generation. The partnership aims to reduce new cervical cancer cases by 95 percent among the estimated 7.1 million women living with HIV who reside in the partnership's 12 African countries, which have some of the highest rates of HIV prevalence and cervical cancer incidence in the world. Women living with HIV are six times more likely to develop invasive cervical cancer.

Since 2018, PEPFAR has invested over \$129 million to support the goals of the Go Further Partnership. As of September 30, 2021, through supporting Go Further goals, we have screened more than 2.8 million women living with HIV for cervical cancer – 84 percent for whom it was their first such screening – and treated over 129,000 cases of pre-cancerous lesions. An estimated 110,000 women are diagnosed annually with cervical cancer in sub-Saharan Africa. Without treatment, 66 percent of these women would be expected to die from the disease.

### *MenStar Coalition*

To support men, PEPFAR helped launch the MenStar Coalition public-private partnership, which supports innovative approaches to deliver appropriate and effective HIV/AIDS services for men, increasing their rapid uptake of HIV testing, linkage to HIV treatment, and achievement of viral suppression. Since the end of 2018, working alongside MenStar partners – the Elton John AIDS Foundation, Unitaid, the Global Fund, Children’s Investment Fund Foundation, Johnson & Johnson, and Gilead Sciences – PEPFAR has reached an additional 2.38 million men with HIV treatment and supported 94 percent of men tested to become virally suppressed.

### *Flip the Script*

What a tremendous difference it makes to people living with HIV to know their medication not only protects their own life, but also those of their partners and children. The powerful public health advantage of communicating this benefit is extraordinary: when people are motivated to take their treatment every day, they achieve and retain an “undetectable” status, reducing new infections and helping achieve critical UNAIDS goals. For these reasons, PEPFAR is investing in better treatment literacy; in partnership with the Bill and Melinda Gates Foundation and Johnson & Johnson, we have developed the “I CAN Campaign.” This campaign not only provides critical information about treatment preventing transmission, but it does so in a way that speaks directly to the hopes and dreams of people living with HIV.

### *Faith and Communities Initiative*

Community organizations and leaders, including faith-based organizations and faith communities, have been at the center of PEPFAR’s efforts since the program’s inception, and they have supported the provision of health care in Africa for decades prior. Through PEPFAR’s \$100 million Faith and Communities Initiative, we have worked to leverage the unique platform and contributions of faith-based organizations and other traditional community organizations to address key gaps to bring HIV under control and ensuring justice for children. Specifically, the Faith and Communities Initiative focuses on two priorities: (1) help find undiagnosed men, youth,

and children living with HIV and support prompt linkage to treatment and continuity of care services; and (2) prevent sexual violence among children and accelerate justice for children who are victims of such violence.

### *Key Populations*

Since its inception, PEPFAR has invested significantly in reaching key populations with quality, non-discriminatory HIV prevention and treatment services. Key populations, including LGBTQI+ individuals, individuals in commercial sex, and people who inject drugs are too often still left behind in the global AIDS response. PEPFAR continues to deepen our efforts to support key populations, including through an increased focus on improving and enabling environment for HIV service delivery by addressing critical policy, programmatic, and structural barriers (e.g., stigma, punitive laws, and gender-based violence) and inequities in HIV service access, uptake, and continuity, particularly for gay, bisexual, and other men who have sex with men, and transgender people – supporting the 10-10-10 global societal enabler targets. We also continue work to accelerate key populations-centered, differentiated HIV services and support the leadership and capacity of key populations-led civil society organizations. In our 2022 PEPFAR country/regional operational planning cycle, we have elevated the issue of stigma and discrimination faced by key populations by establishing a new minimum program requirement. Under this new requirement, all our country and regional programs are mandated to assess and document progress and challenges toward advancing equity, reducing stigma and discrimination, and promoting human rights for key populations and other marginalized groups.

PEPFAR is a founding donor of the Robert Carr Fund, which provides core support for global and regional civil society networks that assist people living with and affected by HIV, with a particular focus on reaching inadequately served populations. PEPFAR provided \$15 million over three years to support the last Robert Carr Fund replenishment drive and provided \$10 million in additional exceptional support to the fund.

PEPFAR also works closely with other parts of the U.S. Department of State to ensure our respective programs, priorities, diplomatic voice, and funding are aligned with and help advance President Biden's Memorandum to Advance the Human Rights of Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex Persons Around the World.

### **Bringing and Maintaining HIV Under Control and Preparing for Future Health Threats**

As we continue to fight HIV and COVID-19, and prepare to stop future pandemics, we can – and must – build on the firm foundations forged by PEPFAR working closely with countries and communities around the world. The United States government is proud to be the world's global health leader, but we will only reach our collective goals through close partnership and decisive action. With additional resources, PEPFAR's assets can be further and efficiently leveraged to support the COVID-19 response, while protecting and expanding HIV services.

“With bipartisan support from the U.S. Congress and the generosity of the American people, PEPFAR has provided over 20.1 million people with life-saving HIV treatment in over 55 countries. These efforts have built, and continue to build, a stronger health infrastructure in many countries, improving health security and responses to other health crises such as COVID-19, mpox, and Ebola.”

-Secretary of State Antony J. Blinken statement on PEPFAR 20<sup>th</sup> Anniversary announcement January 28, 2023

In 2022, the United States hosted the Seventh Replenishment of the Global Fund, which was a prime opportunity for global mobilization toward winning the global AIDS fight and building back better for the future. The year 2023 marks PEPFAR's 20th anniversary. Against this backdrop, we have only seven years to reach the Sustainable Development Goal target of ending AIDS as a public health threat by 2030.

Together, we have made tremendous progress and shown remarkable resilience in the face of unprecedented adversity. Now, it will take all of us, pulling in concert, to ultimately prevail. The U.S. government, through PEPFAR, is poised to continue leading— along with our partners—this historic endeavor, to ending the HIV epidemic everywhere, and to building a healthier, safer world for everyone.

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